Base Station Physicians' Committee (BSPC) - 2007 Meeting Minutes

BSPC Minutes - Tuesday January 16, 2007

BSPC Minutes - Tuesday February 20, 2007

BSPC Minutes - Tuesday March 20, 2007

BSPC Minutes - Tuesday April 17, 2007

BSPC Minutes - Tuesday June 19, 2007

BSPC Minutes - Tuesday July 17, 2007

BSPC Minutes - Tuesday September 18, 2007

BSPC Minutes - Tuesday October 16, 2007

BSPC Minutes - Tuesday November 20, 2007



JEAN M. SHEPARD DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES

1700 PACIFIC HIGHWAY, SAN DIEGO, CALIFORNIA 92101-2417 (619) 531-5800 FAX (619) 515-6707 Community Epidemiology
Emergency & Disaster Medical Services
HIV/STD Hepatitis
Immunization
Maternal, Child and Family Health Services
Public Health Laboratory
PH Nursing/Border Health

TB Control & Refugee Health

Vital Records

NANCY L. BOWEN, M.D., M.P.H PUBLIC HEALTH OFFICER

Base Station Physicians' Committee Jim Dunford, M.D., Chairperson c/o Emergency Medical Services 6255 Mission Gorge Road San Diego, CA 92120 (619) 285-6429 Fax: (619) 285-6531

BASE STATION PHYSICIANS' COMMITTEE MEETING Minutes Tuesday, January 16, 2007

Members Present

Davis, M.D., Dan – UCSD/Mercy Air Dotson, R.N., Melody – UCSD Dunford, M.D., Jim – City of San Diego Glasser, M.D., Judd – Tri-City Grad, M.D., Michele – Palomar/Pomerado Harley, M.D., Jim – Children's Kramer, M.D., Mark – Sharp Memorial Linnik, M.D., Bill – Sharp Grossmont Morikado, M.D., Lisa – Scripps La Jolla Workman, R.N., Debi – Palomar College Zahller, M.D., Steve – Scripps Mercy

County Staff Present

Gardina, R.N., Les Haynes, M.D., Bruce Metz, R.N., Marcy Pate, R.N., Rebecca Stepanski, Barbara

Recorder

Rupp, Merle

Guests Present

Allington, R.N., Linda – Carlsbad Fire Anderson, R.N., Marilyn – Vista Fire Binley, Clark – Southwestern College Broyles, R.N., Linda – Scripps La Jolla Bourdon, R.N., Darlene – Scripps Mercy Buono, M.D., Colleen – UCSD/Palomar Carlson, R.N., Sharon – Sharp Grossmont Cerrone, R.N., Sharon – Mercy Air Eldridge, R.N., Leslie – Sharp Memorial Frederick, William - San Marcos Fire Graham, Dan – S.D. Co. Ambulance Association Graydon, R.N., Cheryl - Palomar Meadows-Pitt, R.N., Mary – Sharp Grossmont Ochs, R.N., Ginger – San Diego Fire Rescue Peavy, Jeremy - UCSD Rainey, R.N., Susan – Tri-City Rosenberg, R.N., Linda – Sharp Memorial Sallee, M.D., Don – Naval Medical Center San Diego Seabloom, R.N., Lynne - Oceanside Fire Smith, R.N., Susan – San Diego Fire Rescue Steen, R.N., Pam - Mercy Air

I. INTRODUCTIONS/ANNOUNCEMENTS

Judd Glasser, M.D., Chair, brought the meeting to order at 11:00 a.m. Attendees introduced themselves.

II. APPROVAL OF MINUTES

MOTION made by Jim Harley, M.D., Seconded by Michele Grad, M.D., to approve the Minutes of November 21, 2006. MOTION carried.

III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)

<u>Alvarado Hospital</u>: The sale has been completed and the hospital and medical staff are reported to be happy with the transition.

<u>Paradise Valley</u>: A separate group is trying to make an offer for the hospital, but it is unclear whether it will be considered by Adventist Health. There will be a public hearing by the Attorney General on January 25, 2007 to gather information and community opinion on the proposed sale.

STEMI Update: The STEMI system went into effect this date (January 16, 2007). The County is evaluating options for an EKG transmission system. A negative EKG should not affect treatment and monitoring. A summary letter sent out December 28, 2006 addressed operational issues.

<u>Infectious Disease Exposures</u>: Field providers report difficulty obtaining follow-up on some perceived exposures, some due to lack of clarity about contact or lack of coverage at the hospital. EMS will evaluate the information and see what is needed. Hospitals should review their response procedures for exposure of field personnel.

<u>Norovirus</u>: A note was sent out on norovirus with information about exposures, clinical symptoms, personal protective equipment and decontamination. This appears to be the cause for gastroenteritis outbreaks around the country. In San Diego there has been an uptick in gastroenteritis recently.

Flu Season: A light flu season so far with mostly Influenza A.

<u>Capacity Study</u>: The December hospital capacity report showed 43% of possible data reported. Several hospitals reported higher times holding patients for admission.

<u>Psychiatric Care in the County</u>: The Emergency Medical Oversight Committee (EMOC) had a very interesting discussion about psychiatric care in the County. The discussion included update on psychiatric facilities throughout the County as well as an overview on PERT (Psychiatric Emergency Response Team) which pairs law enforcement officers with a mental health clinician in the field. Code 5150's were discussed as well.

<u>ALS Transports</u>: The number of ALS transports increased slightly during the month of December, 2006. The number of bypasses increased quite a bit more over the previous month; however, for the entire year, not much change.

<u>Public Health Officer Retirement</u>: Originally Dr. Nancy Bowen's retirement date was anticipated to be May, 2007; however, her date of departure has been moved up to February, 2007.

IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Linda Rosenberg R.N.)

The Base Hospital Nurse Coordinators will continue working on audits and will present them in the near future.

V. <u>ROC UPDATE</u> (Dan Davis, M.D.)

The final hurdles at this time are the indemnification agreements. Once they are finalized, the Hypertonic Saline trial can begin. An option will be developed to re-train all the paramedic crews. An EMS Operations Specialist will help in the field.

The community training has begun for the Cardiac Arrest trial. San Marcos Fire staff did well with the training and integrating it into their program. The American Hospital Association (AHA) lecture updates will be developed into a video format so it can be made available for the agencies and educators as well.

VI. POLICIES FOR REVIEW - (S-400, S-407 and S-414)

ACTION: Policies S-400, S-407 and S-414 were reviewed and some revisions and some further review was suggested in some areas of the policies.

VII. PROTOCOLS FOR REVIEW

ACTION: The following adult protocols were reviewed and discussed: S-122, S-123, S-126, S-127, S-134, S-136 and S-139.

ACTION: The following pediatric protocols were reviewed and discussed: S-161, S-162, S-163, S-165, and S-169.

VIII. <u>HEALTH ADVISORY COMMITTEE ON THREATS</u> (HACOT) (Jim Dunford, M.D.)

No report.

IX. SAN DIEGO HEALTHCARE DISASTER COUNCIL

(Linda Rosenberg, R.N.)

The next County-wide Disaster Drill is scheduled for Thursday and Friday, March 8-9, 2007 with the focus on a large-scale anthrax event. Some hospitals will be conducting full-scale drills.

X. <u>ITEMS FOR FUTURE DISCUSSION</u>

ACTION: Place the discussion about Intraossesous Lines (I.O.'s) on the agenda for the next BSPC meeting of Tuesday, February 20, 2007.

XI. <u>SET NEXT MEETING/ADJOURNMENT</u>

The next meeting was scheduled for Tuesday, February 20, 2007, 11:00 a.m. at Sharp Spectrum Auditorium, 8695 Spectrum Center Court, Kearny Mesa, San Diego.

The meeting adjourned at 12:45 p.m.

Respectfully submitted,



JEAN M. SHEPARD **DIRECTOR**

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WILMA J. WOOTEN, M.D., M.P.H. INTERIM PUBLIC HEALTH OFFICER

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BASE STATION PHYSICIANS' COMMITTEE MEETING

Minutes

Tuesday, February 20, 2007

Members Present

Castro, Ben - Co. Paramedics Agencies Committee Davis, M.D., Dan – UCSD/Mercy Air Dotson, R.N., Melody - UCSD Dunford, M.D., Jim – City of San Diego Geddes, Mike – S.D. Co. Paramedics' Association

Glasser, M.D., Judd - Tri-City

Grad, M.D., Michele - Palomar/Pomerado

Harley, M.D., Jim – Children's

Kramer, M.D., Mark – Sharp Memorial Linnik, M.D., Bill – Sharp Grossmont Morikado, M.D., Lisa – Scripps La Jolla

Schwartz, M.D., Brad – American Medical Response Stonecipher, R.N., Joanne – Southwestern College

Zahller, M.D., Steve – Scripps Mercy

County Staff Present

Haynes, M.D., Bruce Metz, R.N., Marcy Pate, R.N., Rebecca Stepanski, Barbara

Recorder

Rupp, Merle

Guests Present

Anderson, R.N., Marilyn – Vista Fire

Barnes, R.N., Melanie – S.D. Med. Serv. Enterprise

Bourdon, R.N., Darlene – Scripps Mercy Broyles, R.N., Linda – Scripps La Jolla

Buono, M.D., Colleen – UCSD/Palomar College

Cerrone, R.N., Sharon - Mercy Air Eldridge, R.N., Leslie – Sharp Memorial

Graham, Dan – S.D. Co. Ambulance Association

Graydon, R.N., Cheryl - Palomar Kelly, R.N., Donna – UCSD ROC Kremer, D.O., Arnold – Alvarado

Kusman, Travis – American Medical Response Meadows-Pitt, R.N., Mary – Sharp Grossmont Miranda, Aaron – S.D. Co. Paramedics' Association

Nielsen, Michael – UCSD

Rainey, R.N., Susan – Tri-City

Ramanujam, M.D., Prasanthi – UCSD Rosenberg, R.N., Linda – Sharp Memorial Seabloom, R.N., Lynne – Oceanside Fire

Shepherd, Matt – Naval Medical Center San Diego

Smith, R.N., Susan – San Diego Fire Rescue

Steen, R.N., Pam – Mercy Air

Workman, R.N., Debi – Palomar College

I. INTRODUCTIONS/ANNOUNCEMENTS

Judd Glasser, M.D., Chair, brought the meeting to order at 11:00 a.m. Attendees introduced themselves.

II. APPROVAL OF MINUTES

MOTION made by Jim Dunford, M.D., Seconded by Michele Grad, M.D., to approve the Minutes of January 16, 2007. MOTION carried.

III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)

<u>Paradise Valley Hospital</u>: The State Attorney General's Office will be making a decision by February 26, 2007 regarding the purchase of Paradise Valley by Dr. Prim Reddy. There are other local community individuals who also have demonstrated an interest in purchasing it.

Stemi Receiving Center: The Stemi Receiving Center system was activated on January 16th and is functioning well. Some minor issues have shown up such as over-triaging. Destinations for the patients are determined by the twelve-lead results. Paramedics in the field need to be re-freshed on information that was sent out in a letter from Dr. Haynes dated December 20, 2006 and the paramedics need to have Quality Improvement right at the time. The quality and results of the EKG needs to be reported to the base hospital right away; a double-check with the nurses would be helpful.

Brad Schwartz, M.D., American Medical Response, stated that he had discussed this issue with a colleague in Boston where they use electrode type stickers along with a tight Quality Improvement system where the paramedic gives the EKG results to the doctor, the doctor would tell he or she their interpretation, and then the medic is responsible for filling out a web-based survey on that EKG.

The American Heart Association is going to have a task force on STEMI regionalization in Los Angeles soon where Jim Dunford, M.D., will be chairing. Dr. Dunford could present an update at next month's BSPC meeting.

<u>Infectious Disease Exposures</u>: County EMS is conducting a survey from hospitals to make sure that a field provider gets follow-up from a disease exposure and is taken care of right away.

<u>Flu Season</u>: Hospital visits are lower than past years. Influenza isolates fell off last week.

<u>Safety Net</u>: The Health and Human Services Agency is convening a health care safety net roundtable and work groups to look at funding, advocacy, South County and care coordination issues. The Medical Society will be appointing some physicians members. Dr. Haynes and other senior EMS staff met with South Bay hospital representatives recently to discuss offload issues, among other things.

Recent Emergency Medical Care Committee (EMCC) Disaster Operations Subcommittee Meeting: A recent EMCC subcommittee meeting with Chief Pete Lawrence, Oceanside Fire, resulted in a recommended change to language regarding how patients are distributed from the scene of an accident. This language will probably be inserted into the current Annex D document. The language that was agreed upon at the meeting is as follows:

"In a declared Annex D event, it is expected that all receiving hospitals will accept at least one immediate and one delayed patient. Incident Management personnel are authorized to transport up to one immediate and/or one delayed patient to each receiving facility upon initial base hospital contact. Any additional patients transported will be in accordance with bed counts from the base hospitals."

IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Linda Rosenberg R.N.)

Audits are continuing on Pediatric CPR, I.O.'s and Bradycardia and those reports will be brought back to BSPC when completed.

V. <u>ROC UPDATE</u> (Dan Davis, M.D.)

The Hypertonic Saline Study began in San Diego recently but no patients have been enrolled yet. Approximately twenty patients a month are anticipated. Data is also being contributed to the Epistry data base and data use agreements in place with the participating hospitals. The process is in place to stock all the non-City of San Diego units with fluids. The group went through its first data safety monitoring board inspection with ROC at the end of January and there were no problems identified. The San Diego ROC staff are attempting to recruit Orange County to participate in the Hypertonic Saline Study in lieu of the City of San Diego.

The first round of approvals have been completed on the Cardiac Arrest Study with no obstacles raised thus far. Everything is pending final approval by UCSD. The community consultations have been completed. There was media notice but only a handful of people attended the community meetings. The training is approximately half completed for the prehospital agencies in the Cardiac Arrest Trial.

VI. INTRAOSSEOUS LINES - (Bruce Haynes, M.D.)

After reviewing the results from the pediatric intraosseous lines this past year, Dr. Haynes recommended not moving forward with the Intraosseous Lines for adults this year and also due to the fact that staff of County EMS have a multitude of projects going on at this time.

Dr. Dunford suggested at least allowing agencies to "pilot the project," particularly an agency such as the City of San Diego who is not participating in ROC. According to an article in JEMS magazine, 60% of EMS communities perform I.O.'s. He added that the City of San Diego could do it as a pilot project as they are not involved in the ROC.

Dr. Schwartz added that approximately 30-35% of AMR medics across the country are using I.O.'s, and the numbers are increasing each year.

Dan Davis, M.D., made a MOTION that the County allow I.O.'s to be used by the agencies who can demonstrate appropriate training and quality assurance programs to maintain their skills of their providers, and that be subject to approval.

Dr. Dunford recommended including I.O.'s as an optional skill for agencies with the caveat to demonstrate training and quality assurance.

Amending his own MOTION, Dr. Davis added that the optional skill be added to the scope of practice by the agencies, based on assuming they can demonstrate to the

2-20-07, Page 3 of 5

County or this body (BSPC), an appropriate training and quality assurance program. Dr. Dunford seconded it and the committee by consensus advised the MOTION to move forward. MOTION carried.

VII. POLICIES FOR REVIEW

ACTION: The following policies were approved with minor revisions: D-108, P-405 and P-408. P-405 will be reviewed further at the following PAC meeting.

VIII. PROTOCOLS FOR REVIEW

ACTION: The following protocols were approved with minor revisions: S-123, S-127, S-139, and S-163. Protocol S-143 will be reviewed further and brought back to another BSPC meeting.

IX. <u>HEALTH ADVISORY COMMITTEE ON THREATS</u> (HACOT) (Jim Dunford, M.D.)

HACOT met in January. They talked about physician restrictions on Pandemic which was information that apparently came from the Center for Disease Control.

HACOT also discussed outreach to native American tribes coming up with alternative care sites for patients.

X. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)

The next County-wide disaster drill is scheduled for March 8-9, 2007. The scenario will be an anthrax outbreak involving three million people being prophylaxed within seventy-two hours. The City Readiness Initiative program will be initiated and practiced during this drill as well as distribution of the Strategic National Stockpile pharmaceuticals. Through the HRSA (Health Resources and Services Administration) grant, funding has been made possible for the purchase of prophylaxis equipment. Many hospitals will also be testing their internal prophylaxis policies.

The Statement of Work for HRSA Year Five should be going out to hospital administrators shortly for review and signature.

XI. <u>ITEMS FOR FUTURE DISCUSSION</u>

Add to the agenda for next time, the use of Amiodarone and Lidocaine.

XII. <u>SET NEXT MEETING/ADJOURNMENT</u>

The next meeting was scheduled for Tuesday, March 20, 2007, 11:00 a.m. at Sharp Spectrum Auditorium, 8695 Spectrum Center Court, Kearny Mesa, San Diego.

The meeting adjourned at 12:45 p.m.

Respectfully submitted,



JEAN M. SHEPARD DIRECTOR

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BASE STATION PHYSICIANS' COMMITTEE MEETING Minutes Translate March 20, 2007

Tuesday, March 20, 2007

Members Present

Castro, Ben – Co. Paramedics Agencies' Committee Davis, M.D., Dan – UCSD/Mercy Air Glasser, M.D., Judd – Tri-City Grad, M.D., Michele – Palomar/Pomerado Kramer, M.D., Mark – Sharp Memorial Linnik, M.D., Bill – Sharp Grossmont Morikado, M.D., Lisa – Scripps La Jolla Rosenberg, R.N., Linda – Sharp Memorial Schwartz, M.D., Brad – American Medical Response Stonecipher, R.N., Joanne – Southwestern College Zahller, M.D., Steve – Scripps Mercy

County Staff Present

Haynes, M.D., Bruce Metz, R.N., Marcy Pate, R.N., Rebecca Stepanski, Barbara

Recorder

Rupp, Merle

Guests Present

Anderson, R.N., Marilyn – Vista Fire Barnes, R.N., Melanie – S.D. Med. Serv. Enterprise Broyles, R.N., Linda – Scripps La Jolla Cerrone, R.N., Sharon – Mercy Air Childers, Richard - Naval Med. Ctr. San Diego Dotson, R.N., Melody – UCSD Graham, Dan – S.D. Co. Ambulance Association Graydon, R.N., Cheryl - Palomar Hampton, Matt - San Marcos Fire Kremer, D.O., Arnie – Alvarado Kusman, Travis - American Medical Response Marugg, Jim – S.D. Co. Paramedics' Association Meadows-Pitt, R.N., Mary – Sharp Grossmont Morton, Chuck - San Marcos Fire Rainey, R.N., Susan – Tri-City Sallee, M.D., Don – Naval Med. Ctr. San Diego Seabloom, R.N., Lynne - Oceanside Fire Smith, Dennis – Scripps Mercy Smith, R.N., Susan – San Diego Fire Rescue Smithson, James - UCSD Workman, R.N., Debi – Palomar College

Allington, R.N., Linda – Carlsbad Fire

I. <u>INTRODUCTIONS/ANNOUNCEMENTS</u>

Judd Glasser, M.D., Chair, brought the meeting to order at 11:00 a.m. Attendees introduced themselves.

II. APPROVAL OF MINUTES

MOTION made by Lisa Morikado, M.D., Seconded by Michele Grad, M.D., to approve the Minutes of February 20, 2007. MOTION carried.

3-20-07, Page 1 of 4

III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)

<u>Update on RCS Radios</u>: The RCS communication system was scheduled to be tested today as part of the Fail Soft exercise.

<u>New STEMI Receiving Center</u>: This morning (March 20, 2007), Naval Medical Center San Diego was activated as the newest STEMI Receiving Center in San Diego County.

<u>Senate Bill 1773</u>: This morning the County Board of Supervisors approved SB 1773 which provides for an additional \$2.00 of EMS fund (Maddy) revenue per \$10 base assessment. Sixty percent of the anticipated additional funds from this fee will go to physicians who provide uncompensated care and 15% to assist with pediatric trauma care.

<u>Paradise Valley Hospital</u>: Ownership has been transferred to Prime Healthcare. Some of the contracts have been terminated but will probably be re-negotiated. EMS will continue to monitor transfers and services.

<u>STEMI Update</u>: Door-to-balloon times continue to look good. EMS will be developing a report on the first two months of operation. A negative EKG in the field doesn't exclude an evolving STEMI or some other form of acute coronary syndrome. Pleuritic pain and palpated tenderness are often not sufficiently powerful as examination points to exclude cardiac disease.

<u>Safety Net</u>: County Health and Human Services Agency is convening a health care safety net roundtable and work groups to look at funding, advocacy, South County, and care coordination issues.

<u>Drills</u>: The City Readiness Initiative and the POD antibiotic distribution exercises were held recently. The graded SONGS exercise will be later this year. A recent "dress rehearsal" of the drill went well.

<u>Infectious Disease Exposures</u>: Want to make sure field providers receive immediate treatment after possible infectious disease exposures.

<u>Equipment List</u>: EMS has received several requests to make optional changes in the equipment list items. Will be reviewed and thoughts are appreciated.

IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Linda Rosenberg, R.N.)

The Base Hospital Nurse Coordinators conducted an Intraosseous Study from January through December, 2006 with the criteria being a child less than eight years old, and medics unable to establish an I.V. Study revealed twenty-two pediatric patients with an average age of eleven months and 95% who had CPR. Of the I.O.'s attempted, there were three traumatic full arrests and fifteen medical CPR's. Sixteen of twenty-two patients had successful I.O.'s with thirteen on the first attempt, three successful on the second attempt. Success rate 73%. Was a big improvement over the previous year.

This meeting is the last for Susan Rainey, R.N., BHNC for Tri-City, as she's moving out of state. She will be missed.

V. <u>ROC UPDATE</u> (Dan Davis, M.D.)

The Hypertonic Saline Study is up and running, and has enrolled its eleventh patient which was quicker than anticipated, and the medics and MICN's are doing a great job. If the medics enroll a patient, the base hospital needs to be contacted to inform Dr. Davis, and the trauma team needs to be informed as well.

Training is approximately three-quarters completed in the County for the Cardiac Arrest Study. Final approval was just received from UCSD for the Study. A site plan will be developed and the Study will hopefully begin in April or May, 2007. The agencies need to begin simultaneously.

VI. POLICY FOR REVISION (S-416)

ACTION: Policy S-416 was approved as submitted.

VII. <u>REVIEW OF PROTOCOL</u> (S-143)

This policy was decided not to be pursued any further as it is incorporated in other policies.

VIII. AMIODARONE VS. LIDOCAINE

Discussion ensued on the comparisons of these two medications. Amiodarone would need to be reviewed and approved at the State level. Dr. Haynes suggested that it would be good if Amiodarone vs. Lidocaine could be studied under the ROC umbrella as more information is needed regarding the role of these medications and their effect. **ACTION: Dr. Davis will speak to Jim Dunford, M.D. regarding the medications.**

IX. <u>HEALTH ADVISORY COMMITTEE ON THREATS</u> (HACOT) (Jim Dunford, M.D.)

(Dr. Haynes): HACOT has not met for a couple of months. Once a new County Public Health Officer is appointed, the group will begin meeting regularly again.

X. <u>SAN DIEGO HEALTHCARE DISASTER COUNCIL</u> (Linda Rosenberg, R.N.)

HRSA Year Five contracts are slowly being returned to the County for review.

A "hot wash" review will be held this Wednesday, March 21, 2007 to critique the Countywide disaster drill that occurred on March 8-9, 2007.

The NDMS (National Disaster Medical Services) will be conducting a drill May 14-15, 2007.

XI. <u>ITEMS FOR FUTURE DISCUSSION</u>

Discussion ensued on the utilization of hallway beds as a solution to overcrowding in hospital emergency rooms. One hospital went to State DHS and were told they couldn't do it. One hospital in Orange County used one bed on each floor where the patient could wait until the inpatient bed was ready, provided the patient needed minimal monitoring. State DHS was invited by the Orange County hospital to come and review this situation and they sent a representative who assessed the situation, went away for months, then followed up with a letter stating it wasn't legal to do that. Someone added that there is a nurse who can come and speak on this situation. ACTION: It was recommended Dr. Haynes contact the Orange County nurse and see if she/he can come and speak on it. Place on the next agenda for Tuesday, April 17, 2007.

XII. <u>SET NEXT MEETING/ADJOURNMENT</u>

The next meeting was scheduled for Tuesday, April 17, 2007, 11:00 a.m. at Sharp Spectrum Auditorium, 8695 Spectrum Center Court, Kearny Mesa, San Diego.

The meeting adjourned at 12:45 p.m.

Respectfully submitted,



JEAN M. SHEPARD **DIRECTOR**

HEALTH AND HUMAN SERVICES AGENCY

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BASE STATION PHYSICIANS' COMMITTEE MEETING Minutes

Tuesday, April 17, 2007

Members Present

Davis, M.D., Dan – UCSD/Mercy Air Glasser, M.D., Judd - Tri-City Kramer, M.D., Mark - Sharp Memorial

Kusman, Travis – Co. Paramedics Agencies' Committee

Linnik, M.D., Bill – Sharp Grossmont Morikado, M.D., Lisa – Scripps La Jolla Pao, M.D., Bing - Palomar/Pomerado Rosenberg, R.N., Linda - Sharp Memorial

Schwartz, M.D., Brad - American Medical Response

Workman, R.N., Debi – Palomar College Zahller, M.D., Steve – Scripps Mercy

County Staff Present

Haynes, M.D., Bruce Metz, R.N., Marcy Stepanski, Barbara

Recorder

Rupp, Merle

Guests Present

Allington, R.N., Linda - Carlsbad Fire Anderson, R.N., Marilyn - Vista Fire

Barnes, R.N., Melanie – S.D. Med. Servs. Enterprise

Bourdon, R.N., Darlene – Scripps Mercy Broyles, R.N., Linda – Scripps La Jolla Buono, M.D., Colleen – UCSD/Palomar Cerrone, R.N., Sharon - Mercy Air Dotson, R.N., Melody - UCSD

Graham, Dan – S.D. Co. Ambulance Association

Graydon, R.N., Cheryl – Palomar Majerczak, R.N., Karen - Tri-City

Meadows-Pitt, R.N., Mary – Sharp Grossmont Miranda, Aaron – S.D. Co. Paramedics' Association

Ochs, R.N., Ginger – San Diego Fire Rescue

Sallee, M.D., Don – Naval Medical Center San Diego

Scott, Chris - North County Fire

Seabloom, R.N., Lynne - Oceanside Fire

Smith, Mitch - San Marcos Fire

Smith, R.N., Susan – San Diego Fire Rescue

Villani. Heather – UCSD

Zimmer, Greg - Naval Medical Center San Diego

I. INTRODUCTIONS/ANNOUNCEMENTS

Judd Glasser, M.D., Chair, brought the meeting to order at 11:00 a.m. Attendees introduced themselves.

II. **APPROVAL OF MINUTES**

MOTION made by Lisa Morikado, M.D., Seconded by Steve Zahller, M.D., to approve the Minutes of March 20, 2007. MOTION carried.

<u>New County Public Health Director</u>: Babatunde Jinadu, M.D., has been appointed as the new County Public Health Director, succeeding Nancy Bowen, M.D. Dr. Jinadu will begin his employment with San Diego County on June 8, 2007. He comes from Kern County where he is the Public Health Officer there and has also served on the State EMS Commission.

<u>L.A. Times Article</u>: The Los Angeles Times is working on an article regarding discipline for paramedics and EMT's.

<u>Hemophilia Booklets</u>: At the last Medical Audit Committee (MAC) meeting, Children's Hospital staff distributed two booklets on the evaluation and treatment of hemophilia. The information is available on the web site hemophiliaemergencycare.com.

<u>Paradise Valley Hospital</u>: EMS staff met with Paradise Valley staff several weeks ago and it appears that some of their back-up issues are improving.

<u>STEMI Update</u>: Door-to-balloon times are good in terms of below 90 minutes and the system is functioning well so far.

<u>Law Enforcement Clearances</u>: The Emergency Medical Oversight Committee (EMOC) and the Hospital Association of San Diego and Imperial Counties sent out a letter regarding rapid evaluations of custody patients so officers do not have to wait for long periods. In addition, San Diego City Police Department will begin to take detainees needing clearance to the closest emergency department, rather than concentrating on a small number of facilities.

<u>Diversion Study</u>: The Abaris group is overseeing an emergency department diversion study for the California Healthcare Foundation and will be discussing overcrowding with several hospitals. San Diego County has been identified as one of the counties needing assistance in this area.

IV. <u>BASE HOSPITAL NURSE COORDINATOR'S REPORT</u> (Linda Rosenberg, R.N.)

Radio rooms are switching over from tapes to digital recorders. There could be a two-hour downtime on the radio for upgrading.

V. <u>ROC UPDATE</u> (Dan Davis, M.D.)

The Hypertonic Saline Study is well underway and results are better than anticipated. Currently there are 22 patients in a month and-one-half. The MICN's are responsible for enrollment as they screen patients and make suggestions. The first inspection will occur in a couple of weeks.

IRB (Institutional Review Board) approval was received for the Cardiac Arrest Study. The training is close to 80-90% completed. Hope to go operational by June, 2007. Agencies should consider whether they would like to receive feedback on CPR performance by individual or group data. The group is working on the process for collecting the data at this time.

base that the County maintains or in the patient care records. Sometimes backtracking to the dispatch centers for CAD data is required.

VI. HEALTH ADVISORY COMMITTEE ON THREATS (HACOT) (Jim Dunford, M.D.)

Some subcommittees have been meeting occasionally. The larger umbrella group will more than likely begin to meet again once Dr. Jinadu begins employment.

VII. SAN DIEGO HEALTHCARE DISASTER COUNCIL

(Linda Rosenberg, R.N.)

The contracts have all gone out to the hospitals for HRSA (Health Resources and Services Administration) Year Five along with a tool kit that will assist in meeting the requirements for contact personnel.

The next NDMS (National Disaster Medical Services) drill is scheduled for May 14-15, 2007 and will consist of patients being evacuated from a military hospital to civilian hospitals. A separate admission process would need to be established for these patients who would be coming in to each hospital. There may be a conflict for many staff who attend the BSPC and PAC meetings on May 15. It was suggested that the May BSPC/PAC meetings could be canceled and meet in August instead which is usually a dark month. ACTION: Consensus was reached that BSPC and PAC will not meet in May, 2007 as attendees will be participating in the NDMS drill and that will count as the meeting date.

The State Department of Health contracted with Price/Waterhouse/Cooper to develop some State standards, guidelines, operational tools and training materials for health care surge during emergencies. With the input from many stakeholders, 2,500 issues and recommendations were identified with forty-seven workgroups, then broken down into eight groups. San Diego County will be represented with at least one or two staff in each of the eight groups. ACTION: Ms. Metz suggested that if anyone on BSPC was interested in participating in any of these work groups to contact her. The meetings will be held in Los Angeles on May 1-2, 2007.

VIII. ITEMS FOR FUTURE DISCUSSION

At the March 20, 2007 BSPC meeting, there was discussion about a nurse from Orange County coming to speak regarding hallway bed issues in emergency rooms. **ACTION:** Dr. Glasser and Dr. Haynes will follow-up.

Bill Linnik, M.D., Sharp Grossmont, stated that he was approached by the Vascular Surgery group at Sharp Grossmont which has expanded and added new members. Some members feel they're capable of conducting vascular surgery for patients who are taken to trauma centers. Discussion continued that an issue may be that these surgeons have to be available every day of the year.

IX. SET NEXT MEETING/ADJOURNMENT

Due to the May 14-15, 2007 NDMS drill, the next meeting was scheduled for Tuesday, June 19, 2007, 11:00 a.m. at American Medical Response, 8808 Balboa Avenue, Kearny Mesa, San Diego.

The meeting adjourned at 12:10 p.m.

Respectfully submitted,



JEAN M. SHEPARD DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES

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Public Health Laboratory

PH Nursing/Border Health TB Control & Refugee Health Vital Records

WILMA J. WOOTEN, M.D., M.P.H. PUBLIC HEALTH OFFICER

Base Station Physicians' Committee Judd Glasser, M.D., Chairperson c/o Emergency Medical Services 6255 Mission Gorge Road San Diego, CA 92120

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BASE STATION PHYSICIANS' COMMITTEE MEETING Minutes

Tuesday, June 19, 2007

Members Present

Glasser, M.D., Judd - Tri-City

Grad, M.D., Michele - Palomar/Pomerado

Harley, M.D., Jim - Children's

Kramer, M.D., Mark – Sharp Memorial

Linnik, M.D., Bill – Sharp Grossmont

MacPherson, Gary - Co. Paramedic Agencies' Comm.

Morikado, M.D., Lisa – Scripps La Jolla

Rosenberg, R.N., Linda - Sharp Memorial

Schwartz, M.D., Brad – American Medical Response Stonecipher, R.N., Joanne – Southwestern College

Zahller, M.D., Steve – Scripps Mercy

County Staff Present

Haynes, M.D., Bruce Metz, R.N., Marcy Pate, R.N., Rebecca Stepanski, Barbara

Recorder

Rupp, Merle

Guests Present

Anderson, R.N., Marilyn – Vista Fire

Barnes, R.N., Melanie – S.D. Med. Services Enterprise

Barsalou, Thea - UCSD ROC

Bourdon, R.N., Darlene - Scripps Mercy

 $Buono,\,M.D.,\,Colleen-\,UCSD/Palomar\,College$

Cerrone, R.N., Sharon – Mercy Air Dotson, R.N., Melody – UCSD

Foehr, Rick – EMSTA, Inc.

Graydon, R.N., Cheryl - Palomar

Johnson, Wayne – S.D. Med. Services Enterprise

Kelly, R.N., Donna – UCSD ROC

Kremer, Arnie - Alvarado

Kusman, Travis – American Medical Response

Majerczak, R.N., Karen – Tri-City

Marugg, Jim – S.D. Co. Paramedics' Association Meadows-Pitt, R.N., Mary – Sharp Grossmont Mottet, Mary – S.D. Med. Services Enterprise

Ochs, R.N., Ginger – San Diego Fire Rescue

Sallee, M.D., Don – Naval Med. Center San Diego

Scott, Chris – North County Fire Smith, Mitch – San Marcos Fire

Smith, R.N., Susan – San Diego Fire Rescue Workman, R.N., Debi – Palomar College

I. <u>INTRODUCTIONS/ANNOUNCEMENTS</u>

Judd Glasser, M.D., Chair, brought the meeting to order at 11:00 a.m. Attendees introduced themselves.

II. APPROVAL OF MINUTES

MOTION made by Mark Kramer, M.D., Seconded by Steve Zahller, M.D., to approve the Minutes of April 17, 2007. MOTION carried.

III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)

<u>New Interim EMS Chief</u>: Marcy Metz, R.N., has been appointed EMS Interim Director for three months. There will be a recruitment for a permanent Chief in the near future. Carmel Angelo, resigned to take the position of Director of Health and Human Services of Mendocino County, California.

<u>PPR's (Personal Patient Record) for Hospitals</u>: The trauma surgeons have asked that a PPR be available in the hospital for every patient. The potential for major problems arises when something is recorded on the PPR and not addressed by the physician.

<u>STEMI Update</u>: The system is going very well. Door-to-balloon times continue to look good and the system is meeting expectations at this point, with about 80% within 90 minutes. A first quarter report will be coming out in the future.

<u>Taser Issues</u>: EMS is reviewing this. Taser discharges by themselves are not considered to be dangerous. Patients with agitated delirium, who frequently have taken stimulants, are at risk of sudden death. Hyperthermia is a sign of high risk for death. If a patient with agitated delirium needs to be restrained, it should be done, if possible, without pressure on the chest or abdomen that impairs ventilation.

<u>Stroke Task Force</u>: The Stroke Task Force met June 7, 2007 and discussed criteria and future plans.

<u>Orange County Speaker on E.R. Hallway Issues</u>: The nurse from Orange County could come and speak on hallway bed issues in emergency rooms, possibly in July, 2007.

<u>Suicide Conference</u>: There is a suicide conference being scheduled at Scripps Mercy for November, 2007.

<u>Pregnant Teenagers</u>: This issue came up with the Medical Audit Committee (MAC). Children's Hospital transfers pregnant teenagers they receive to Sharp Memorial for trauma care. Children's is willing to take them if the female is under twenty weeks pregnant. Dr. Haynes volunteered to write up a guideline and have it sent out.

IV. <u>BASE HOSPITAL NURSE COORDINATOR'S REPORT</u> (Linda Rosenberg, R.N.)

The BHNC's are reviewing what their next audit will be.

The group is also reviewing some of the changes for Congestive Heart Failure.

Linda Broyles, R.N., has resigned her BHNC position at Scripps La Jolla and has taken a new position with American Medical Response (AMR).

V. ROC UPDATE (Bruce Haynes, M.D.)

As of last week, between 33-34 patients were enrolled in the Hypertonic Saline Study. The group has been trying to have paramedics/EMT's focus on patients in the field to see if they qualify, not only hypotensive blunt trauma patients, but also patients with isolated head injuries.

The Cardiac Arrest Study is targeted to begin in July or later. Approximately 90% of the prehospital personnel who require training have been trained.

VI. <u>USE OF CPAP (Continuous Positive Airway Pressure</u> (Judd Glasser, M.D.)

Dr. Glasser stated that Dr. Haynes had approached him several months ago about the County having an interest in conducting a preliminary study or pilot program on CPAP. Primary questions included: is it effective, what is the benefit, what are the potential risks and what are the costs?

Results were that it reduces the work of breathing, it improves oxygenation, it avoids complications associated with mechanical ventilation and has uses in chronic obstructive pulmonary disease and acute pulmonary edema.

Two studies have shown quite a bit of support for non-invasive positive pressure being very effective and helping to reduce the rate of intubation of these patients along with the overall mortality.

In regard to cost, CPAP is generally cheaper than BIPAP and smaller units are available. CPAP is also operator-friendly.

(Brad Schwartz, M.D.): AMR currently has three different studies throughout the country looking at the three different CPAP devices. **ACTION: Dr. Schwartz can provide more information.**

The issue of whether or not the emergency room is ready to receive a patient on CPAP was brought up. It is preferred to have a respiratory therapist with a CPAP machine who can transfer the patient to their equipment. Paramedics/EMT's would need to notify the base hospital ahead of arrival.

VII. <u>HEALTH ADVISORY COMMITTEE ON THREATS</u> (HACOT) (Jim Dunford, M.D.)

(Marcy Metz, R.N.): Wilma Wooten, M.D., has been named the County's Public Health Officer. Dr. Wooten is very much integrated in the grants and disaster preparedness areas. She is currently conducting an assessment of all the disaster groups throughout San Diego County and has also asked the HRSA (Health Resources and Services Administration) workgroup to give her agenda items for HACOT. A multi-disciplinary community input is necessary for many grants.

VIII. SAN DIEGO HEALTHCARE DISASTER COUNCIL

(Linda Rosenberg, R.N.)

Many courses are available funded through the HRSA Year Five grant. Classes will be held at Sharp, Scripps and UCSD facilities and most are free. Courses will include, but not be limited to mass triage, decontamination, and use of PAPR's. **ACTION: Please let Ms. Rosenberg know if you need more information.**

The Council has also been working on a regional inventory list, that would be accessible to emergency operations centers in emergency situations.

Some Council and hospital representatives participated in the NDMS (National Disaster Medical Response) drill on May 14-15, 2007. The drill was with the military where patients from another site were off-loaded from a military plane at Miramar Marine Corps Air Station and theoretically transferred to local hospitals. Scenarios of the drill included evacuations and flooding, and hospitals had to provide their bed availability counts often. For many hospitals, it was more of an internal drill for the floors and intensive care units. The Council will be conducting a summary review at it's meeting Wednesday, June 20, 2007.

IX. <u>ITEMS FOR FUTURE DISCUSSION</u>

Dr. Haynes will check into whether the nurse from Orange County will be able to present in July, 2007 regarding hallway bed issues in emergency departments.

(Other): (Pam Steen, R.N.): The Commission on Accreditation of Medical Transport Systems will be conducting an accreditation site visit of Mercy Air, July 19-20, 2007. If anyone would like to give information to the Accreditation Commission, they are welcome to do so.

(Other): Discussion ensued regarding whether or not BSPC wanted to have the Pearls from PAC included in their minutes. It was suggested that maybe these could be brought to the committee annually even though they are sent out by e-mail each time.

(Other): (Dr. Glasser): Discussion ensued regarding the San Diego City policy of intubation performed when there is a lack of an End-tidal CO2 reading versus no End-tidal CO2 reading at all.

(Dr. Linnik): There were a lot of these cases to the point that it was thought to be a system issue. If the CO2 detector is not working then it has to be put aside. Each case was reviewed and the folks involved counseled on what to do and how to use the new technology.

(Dr. Glasser): The Committee supports the base hospital physician in circumstances where there is a question whether or not the paramedics can intubate at that time to use the local policy. If the base hospital physician orders the intubation, that's what the paramedics should be doing.

(Ginger Ochs, R.N.): If you have a CO2 reading and lose it, change detectors paying attention to your CO2 readings. If you're having trouble getting the CO2 reading back, go back to a basic airway.

(Other): The question was asked if anyone had feedback from the Rock 'N Rock Marathon. ACTION: Melody Dotson, R.N., UCSD, was send Dr. Glasser a summary.

X. <u>SET NEXT MEETING/ADJOURNMENT</u>

The next meeting was scheduled for Tuesday, July 17, 2007, 11:00 a.m. at Sharp Spectrum Auditorium, 8695 Spectrum Center Court, Kearny Mesa, San Diego.

The meeting adjourned at 12:10 p.m.

Respectfully submitted,



JEAN M. SHEPARD DIRECTOR

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Base Station Physicians' Committee Judd Glasser, M.D., Chairperson c/o Emergency Medical Services 6255 Mission Gorge Road San Diego, CA 92120

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BASE STATION PHYSICIANS' COMMITTEE MEETING Minutes Tuesday, July 17, 2007

Members Present

Davis, M.D., Dan – UCSD/Mercy Air
Dunford, M.D., Jim – City of San Diego
Glasser, M.D., Judd – Tri-City
Grad, M.D., Michele – Palomar/Pomerado
Harley, M.D., Jim – Children's
Kramer, M.D., Mark – Sharp Memorial
Linnik, M.D., Bill – Sharp Grossmont
MacPherson, Gary – Co. Paramedics Agencies Comm.
Morikado, M.D., Lisa – Scripps La Jolla
Rosenberg, R.N., Linda – Sharp Memorial
Zahller, M.D., Steve – Scripps Mercy

County Staff Present

Haynes, M.D., Bruce Pate, R.N., Rebecca Stepanski, Barbara

Guests Present

Allington, R.N., Linda – Carlsbad Fire Bourdon, R.N., Darlene – Scripps Mercy Broyles, R.N., Linda - AMR/RCCP Buono, M.D., Colleen – UCSD/Palomar Burk, Dave - La Mesa Fire Dotson, R.N., Melody - UCSD Graydon, R.N., Cheryl – Palomar How, Chung Kang - UCSD Howard, R.N., LuAnn – Scripps La Jolla Majerczak, R.N., Karen – Tri-City Marugg, Jim – S.D. Co. Paramedics Association Meadows-Pitt, R.N., Mary - Sharp Grossmont Ochs, R.N., Ginger - San Diego Fire Rescue Sallee, M.D., Don - Naval Med. Ctr. San Diego Scott, Chris - No. County Fire Smith, R.N., Susan - San Diego Fire Rescue

Recorder

Rupp, Merle

I. <u>INTRODUCTIONS/ANNOUNCEMENTS</u>

Judd Glasser, M.D., Chair, brought the meeting to order at 11:00 a.m. Attendees introduced themselves. Dr. Glasser thanked everyone for making the trip to Tri-City.

II. APPROVAL OF MINUTES

MOTION made by Michele Grad, M.D., Seconded by Jim Harley, M.D., to approve the Minutes of June 19, 2007. MOTION carried.

III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)

<u>Tourniquets</u>: The issue of using tourniquets was discussed at the Medical Audit Committee (MAC) meeting on July 16, 2007. It is being examined again given its' increased use in trauma on the battlefield today. Some surgeons at MAC felt they aren't necessary, but would like to see more information. If anyone has further concerns, please contact Dr. Haynes.

<u>Heat Injury</u>: EMS is part of a HHSA response group to monitor and prevent heat injury. Heat indexes are monitored throughout the summer. Cooling centers such as libraries, shopping centers, etc. are advised, particularly for the elderly.

<u>Proposed Advanced EMT Program</u>: EMS has sent out a letter to the fire departments regarding a proposed advanced EMT program. It's been used in some counties in the State, primarily in rural areas, and has been added to the State EMT regulations in the last couple of years. Responses are beginning to come back to EMS. If there is a great deal of interest on the part of fire and first responders, the issue will be brought back again to BSPC.

<u>Pregnant Teenagers</u>: It has been agreed upon that it is best to send pregnant children, (14-years old and under) that are major trauma patients, to UCSD has volunteered to accept those patients. Possibly some guidelines can be written up and brought to the next BSPC meeting.

Stroke Policy: The draft policy "Destination of Acute Stroke Patient" was discussed. The Stroke Task Force wants to be sure that hospitals are capable of evaluating and caring for stroke patients. From a survey that was distributed recently, it is known that five hospitals have JCAHO certification as primary stroke centers in San Diego County and a larger number are going to be obtaining that certification in the future. According to the proposed policy, hospitals will be able to post on the Quality Assurance Network whether or not they are able to accept a stroke patient. It was suggested to remove time expectations from the policy and possibly add the Brain Attack Coalition criteria at the end of the policy.

<u>Proposed Nurses Strike</u>: Fortunately Sharp Healthcare nurses reached an agreement and did not strike. Plans were made to reduce hospital census at Sharp hospitals so that fewer patients would be affected if there was a strike.

<u>STEMI Update</u>: First quarter data (January 16 – March 31, 2007) confirmed the success of the STEMI receiving system achieving great door-to-balloon times. There were 147 emergency 9-1-1 patients, of whom 122 (83%), went to the cardiac catherization lab. The median door-to-balloon times for patients getting a PCI was 67 minutes.

IV. <u>BASE HOSPITAL NURSE COORDINATOR'S REPORT</u> (Linda Rosenberg, R.N.)

LuAnn Howard, R.N., was introduced by Linda Broyles, R.N., as the new Base Hospital Nurse Coordinator for Scripps La Jolla, effective June 14, 2007. Ms. Broyles is now working for American Medical Response and the South Bay Regional Cooperative Program.

V. <u>ROC UPDATE</u> (Dan Davis, M.D.)

The Hypertonic Saline Study now has between 50-55 patients enrolled. This is about one-half to two-thirds of what was anticipated with the City of San Diego not being able to participate. ROC may have to expand to include Orange County or other sites. Each site is being encouraged to maximize enrollment. Dr. Davis would appreciate any feedback. Funding for the project is tied to enrollment.

The Cardiac Arrest Study schedule is proposed to begin in late August, 2007, then every cardiac arrest patient is essentially enrolled. The data must then be accessed to demonstrate how closely they adhere to their assigned group.

VI. ENERGY SETTINGS FOR DEFIBRILLATION (Judd Glasser, M.D.)

Brad Schwartz, M.D., had approached Dr. Glasser regarding what he felt should be better defined guidelines in the County protocols regarding energy settings for defibrillation. Appeared that recommendations from an e-mail Dr. Davis sent out indicated to "defer to the manufacturer." There are no objectives studies to tell what shock doses should be used. Dr. Glasser will follow-up with Dr. Schwartz.

VII. <u>HEALTH ADVISORY COMMITTEE ON THREATS</u> (HACOT) (Jim Dunford, M.D.)

HACOT will begin meeting on July 18, 2007 with the leadership of the new County Public Health Officer, Wilma Wooten, M.D.

VIII. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)

The annual Statewide disaster exercise is scheduled for Thursday, October 25, 2007.

IX. ITEMS FOR FUTURE DISCUSSION

Ms. Rosenberg announced that Children's Hospital wants to do a presentation and will relay that information to Dr. Glasser.

X. SET NEXT MEETING/ADJOURNMENT

The next meeting was scheduled for Tuesday, September 18, 2007, 11:00 a.m. at American Medical Response, 8808 Balboa Avenue, Kearny Mesa, San Diego.

The meeting adjourned at 12:10 p.m.

Respectfully submitted,



JEAN M. SHEPARD DIRECTOR

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Base Station Physicians' Committee Judd Glasser, M.D., Chairperson c/o Emergency Medical Services 6255 Mission Gorge Road San Diego, CA 92120

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BASE STATION PHYSICIANS' COMMITTEE MEETING Minutes

Tuesday, September 18, 2007

Members Present

Glasser, M.D., Judd – Tri-City
Grad, M.D., Michele – Palomar/Pomerado
Kramer, M.D., Mark – Sharp Memorial
Linnik, M.D., Bill – Sharp Grossmont
MacPherson, Gary – Co. Paramedics Agencies' Comm.
Reilly, M.D., Ian – Scripps La Jolla
Rosenberg, R.N., Linda – Sharp Memorial
Zahller, M.D., Steve – Scripps Mercy

County Staff Present

Haynes, M.D., Bruce Pate, R.N., Rebecca Ray, Ph.D.(c), Leslie Royer, R.N., Diane Stepanski, Barbara

Guests Present

Allington, R.N., Linda – Carlsbad Fire Anderson, R.N., Marilyn - Vista Fire Barsalou, Thea - UCSD ROC Bourdon, R.N., Darlene – Scripps Mercy Broyles, R.N., Linda – RCCP/AMR Carlson, R.N., Sharon - Sharp Grossmont Dotson, R.N., Melody - UCSD Graydon, R.N., Cheryl - Palomar Howard, R.N., LuAnn – Scripps La Jolla Kelly, R.N., Donna – UCSD ROC Majerczak, R.N., Karen - Tri-City Ochs, R.N., Ginger – San Diego Fire Rescue Quinn, R.N., Michele – Children's Ross, Alyssa – City of San Diego Sallee, M.D., Don – Naval Medical Center San Diego Scott, Chris - North County Fire Seabloom, R.N., Lynne - Oceanside Fire

Recorder

Rupp, Merle

I. INTRODUCTIONS/ANNOUNCEMENTS

Judd Glasser, M.D., Chair, brought the meeting to order at 11:00 a.m. Attendees introduced themselves.

Ian Reilly, M.D., was introduced as the new Base Hospital Medical Director for Scripps La Jolla.

Michele Quinn, R.N., was introduced as the new representative from Children's Hospital.

II. <u>APPROVAL OF MINUTES</u>

MOTION made by Michele Grad, M.D., Seconded by Steve Zahller, M.D., to approve the Minutes of July 17, 2007 as submitted. MOTION carried.

III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)

New County EMS Q.A. Specialist: Dr. Haynes introduced Diane Royer, R.N., as a new Quality Assurance Specialist from County EMS. Her area of responsibility will be working with facilities, base hospitals, cardiac receiving centers and similar areas. Ms. Royer worked as a field EMT and advanced EMT while attending nursing school. Her nursing focus has been in the emergency department, a trauma center in another county, and with a cardiac catherization laboratory.

<u>Tourniquets</u>: Most of the surgeons that were contacted recently regarding the use of tourniquets weren't very enthusiastic about using them. Couldn't see the correlation between the use of those in the battlefields of Iraq and Afghanistan vs. locally. Further discussions may occur in the future.

<u>STEMI Update</u>: Second-quarter data has demonstrated excellent door-to-balloon times. The median door-to-balloon time appears to be about 60 minutes for the 9-1-1 activated patients.

<u>Advanced EMT Skills</u>: A questionnaire was recently sent out from County EMS regarding adding a few additional skills for EMT's. A number of rural providers are particularly interested in this issue.

<u>Assembly Bill 941</u>: This bill passed in the State Legislature within the last couple of days to change EMT licensing and discipline but has not been signed by the Governor at this point. If it passes, the bill would establish a statewide EMT certification registry, subject to funding, making providers responsible for EMT investigations and discipline, and change some of the grounds for discipline in the law.

<u>Trauma Resource</u>: From the Medical Audit Committee (MAC), there has been some concern about the "trauma resource designation" and they would prefer to see patients designated clearly as a trauma patient or not.

IV. <u>BASE HOSPITAL NURSE COORDINATOR'S REPORT</u> (Linda Rosenberg, R.N.)

The new digital radio system has been installed in the emergency room radio rooms in regard to being able to retrieve calls.

V. ROC (Resuscitation Outcomes Consortium) UPDATE (Donna Kelly, R.N.)

Ms. Kelly introduced Thea Barsalou who has joined the ROC group with Donna and Lana Brown, R.N.

paramedics are doing a great job bringing these patients into the trial; however, paramedics should be reminded that if the Glasgow score is eight or less, the patient(s) can be enrolled into ROC. The paramedics have documentation in their packet that should be included as part of the patient hospital record.

The County has been very helpful in identifying those patients in the the Trauma Cardiac Arrest Study that belong in Epistry. There has been a problem in linking up the prehospital information with the hospital information. Ms. Brown has attended the Base Hospital Nurse Coordinators meeting to ask someone to assist with that link. Ms. Kelly welcomed any ideas people might have.

Preparation for the Cardiac Arrest Trial is nearly complete. One more IRB (Institutional Review Board) is scheduled. The training is almost completed and meetings are now being held with hospital emergency department staff. The trial may begin by mid-to-end of October, 2007. The ROC staff are working on how to download information from all the different defibrillators in various rigs.

VI. <u>HIPAA UPDATE</u> (Leslie Ray, Ph.D.(c)

Leslie Ray, Ph.D.(c), County EMS, distributed a handout regarding HIPAA (Health Insurance Portability and Accountability Act). She discussed the following question and answer scenarios:

- Q. The receiving hospital claims it is a violation of HIPAA for them to give out some data to the prehospital agency on a transported patient.
- A. This is a permitted disclosure of an individual's health data under HIPAA. Since the prehospital agency is seeking information for a common patient, the information can be released without an authorization from the patient.
- Q. The base hospital will not release the radio tape on a specific patient to the transporting agency. The transporting agency needs this to conduct QA/QI.
- A. Similar situation. This involves information on a single, common patient and is requested for the purposes of health care operations.
- Q. The education program has requested radio tapes for general training purposes not specific QA/QI.
- A. If the tapes contain individual identifying information such as name, address or social security number, they cannot be released for general training purposes. If the identifying information is removed or edited out then the tapes could be provided. better solution would be to develop a library of training tapes using real life scenarios.

Ms. Ray advised attendees to contact their own hospital or agency legal representative to obtain clarification on specific in-house issues. Also, if there were encryption issues, attendees were encouraged to discuss those with their information technology department.

VII. NON-ACCIDENTAL HEAD TRAUMA(Marilyn Kaufhold, M.D., Children's Hosp.)

9-18-07, Page 3 of 5

A

Dr. Glasser introduced Marilyn Kaufhold, M.D., Pediatrician from Children's Hospital. Her presentation was titled "Identifying Abusive Head Trauma." Some highlights from her presentation included but were not limited to:

- Confession and medical determination are tools used to identify head trauma
- Most children are not injured seriously in simple household falls
- Child abuse is rarely a one-time event
- Leading cause of non-accidental injury death is head trauma
- 50% of the trauma deaths are non-accidental head trauma
- The ranges of injury are many; including, scalp bruises and skull fractures, subdural and epidural hematoma, brain contusions or brain edema
- Approximately 30% of the inflicted head injuries may be missed on health care visits
- Sometimes cases have to be reported to law enforcement and Child Protective Services
- Sometimes symptoms are subtle such as crying, vomiting, lethargy and irritability
- A study from Denver in the late 1990's revealed of 173 cases reviewed of abusive head trauma of children under three years old, 55% were male, 45% female. 31% of the cases were missed: 9.3% of the missed cases died and 40.7% had complications related to delay in diagnosis of abusive head trauma

VIII. <u>DESTINATION OF ACUTE STROKE PATIENT DRAFT POLICY</u> (Bruce Haynes, M.D.)

Discussion ensued on whether or not the word "neurologist" should be included in the policy. It was stated that a neurologist is always going to be involved in the treatment, at least as a consultant. More hospitals are seeking Joint Commission stroke certification. **ACTION: Dr. Haynes will make the suggested revisions to the policy.**

IX. <u>HEALTH ADVISORY COMMITTEE ON THREATS</u> (HACOT) (Bruce Haynes, M.D.)

With the hiring of the new Public Health Officer Wilma Wooten, M.D., HACOT began meeting again in July and August. At the August 15, 2007 meeting, HACOT discussed and reviewed the Medical Reserve Corps and recruitment of members. They also discussed topics for the County television network as well as alternative care sites that might be set up in the event of a pandemic flu outbreak or a similar situation when all hospitals are overwhelmed. They discussed the Surge Plan regarding pandemic flu and the HRSA Year Six (Health Resources and Services Administration) grant which was submitted to the State. The grant was requested for enhancing laboratory capabilities for some of the bioterrorism agencies. HACOT also has some subcommittees looking at risks for special populations and education for kindergarten through twelfth grade.

Jim Dunford, M.D. had informed the Chair that he no longer desires to be the HACOT representative from BSPC. A request was made for a replacement. **ACTION: Linda Rosenberg, R.N., Sharp Memorial, is currently a representative at HACOT and volunteered to bring information from HACOT back to BSPC. Dr. Haynes will plan on continuing to attend HACOT meetings as well.**

X. SAN DIEGO HEALTHCARE DISASTER COUNCIL

(Linda Rosenberg, R.N.)

San Diego submitted proposals for two partnership grants recently; one being focused on ancillary sites like community partnerships and the other one was more hospital focused to alleviate surge in the emergency room. Responses on the grant applications are expected back by late October, 2007.

The annual State-wide disaster drill is scheduled for Thursday, October 25, 2007 and involves a plague outbreak. Sharp Memorial will only participate with radio communication as it is the "Sharp Experience Day." Another drill is scheduled for November 8, 2007 which will be more of a radiation decontamination opportunity drill.

The Healthcare Disaster Council toured the U.S. Naval Ship Mercy for its' August meeting. The ship can accommodate up to 1000 patients and has twelve operating rooms.

XI. <u>ITEMS FOR FUTURE DISCUSSION</u>

None.

XII. <u>SET NEXT MEETING/ADJOURNMENT</u>

The next meeting was scheduled for Tuesday, October 16, 2007, 11:00 a.m. at Sharp Spectrum Auditorium 8695 Spectrum Center Court, Kearny Mesa, San Diego.

The meeting adjourned at 12:10 p.m.

Respectfully submitted,



JEAN M. SHEPARD DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES

1700 PACIFIC HIGHWAY, SAN DIEGO, CALIFORNIA 92101-2417 (619) 531-5800 FAX (619) 515-6707 Community Epidemiology
Emergency & Disaster Medical Services
HIV, STD and Hepatitis
Immunization

Maternal, Child and Family Health Services
Public Health Laboratory
PH Nursing/Border Health
TB Control & Refugee Health
Vital Records

WILMA J. WOOTEN, M.D., M.P.H. PUBLIC HEALTH OFFICER

Base Station Physicians' Committee Judd Glasser, M.D., Chairperson c/o Emergency Medical Services 6255 Mission Gorge Road San Diego, CA 92120

(619) 285-6429 Fax: (619) 285-6531

BASE STATION PHYSICIANS' COMMITTEE MEETING Minutes

Tuesday, October 16, 2007

Members Present

Davis, M.D., Dan – UCSD/Mercy Air Dunford, M.D., Jim – City of San Diego

Glasser, M.D., Judd - Tri-City

Grad, M.D., Michele - Palomar/Pomerado

 $Harley,\,M.D.,\,Jim-Children's$

Linnik, M.D., Bill - Sharp Grossmont

Miranda, Aaron – S.D. Co. Paramedics' Association

Reilly, M.D., Ian – Scripps La Jolla

Rosenberg, R.N., Linda - Sharp Memorial

Stonecipher, R.N., Joanne – Southwestern College

Zahller, M.D., Steve – Scripps Mercy

County Staff Present

Haynes, M.D., Bruce Pate, R.N., Rebecca Royer, R.N., Diane Smith, Ph.D., Alan Stepanski, Barbara

Recorder

Rupp, Merle

Guests Present

Allington, R.N., Linda – Carlsbad Fire Anderson, R.N., Marilyn – Vista Fire

Barnes, R.N., Melanie – S.D. Med. Servs. Enterprise

Bourdon, R.N., Darlene – Scripps Mercy

Broyles, R.N., Linda – RCCP/AMR

Esquer, Perry – San Diego Fire Air Ops

Fisher, Roger – San Diego Fire Rescue

Foehr, Rick – EMSTA, Inc.

 $Graydon,\,R.N.,\,Cheryl-Palomar$

How, Chang-Kwang-UCSD

Howard, R.N., LuAnn – Scripps La Jolla

Kelly, R.N., Donna - UCSD ROC

Kusman, Travis – American Medical Response

Modafi, P. Jamil - Children's

Majerczak, R.N., Karen - Tri-City

Marugg, Jim - S.D. Co. Paramedics' Association

Meadows-Pitt, R.N., Mary - Sharp Grossmont

Ochs, R.N., Ginger – San Diego Fire Rescue

Reese, D.O., Ph.D., Nicolini - Naval Med. Ctr. S.D.

Scott, Chris - North County Fire

Seabloom, R.N., Lynne – Oceanside Fire

Smith, Mitch - San Marcos Fire

Smith, R.N., Susan – San Diego Fire Rescue

Steen, R.N., Pam - Mercy Air

I. INTRODUCTIONS/ANNOUNCEMENTS

Judd Glasser, M.D., Chair, brought the meeting to order at 11:00 a.m. Attendees introduced themselves.

II. APPROVAL OF MINUTES

MOTION made by Jim Harley, M.D., Seconded by Michele Grad, M.D., to approve the Minutes of September 18, 2007 as submitted. MOTION carried.

III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)

Overcrowding Summit: Was a great success. Out-of-town speakers presented different ideas on what is occurring around the State. EMOC (Emergency Medical Oversight Committee) will try to follow-up with some of the issues. In terms of off-load delays, it has been suggested that when an off-load delay of a patient is likely, hospital personnel make eye contact with the arriving crew, inquire about the patient's status and give some estimate of the delay or current situation. **ACTION: Dr. Haynes to generate letter to emergency departments addressing courtesy issue.**

<u>STEMI Update</u>: Second quarter data reinforced the excellent door-to-balloon times achieved in the STEMI Receiving System. The median door-to-balloon time was 59 minutes with the mean 66 minutes for cases that were activated in the field. The number of cases meeting the goal of less than 90 minutes was 88%. The Cardiac Advisory Committee (CAC) reviewed the door-to-balloon information and for the first time performed a review of catherization cases.

<u>Destination of Acute Stroke Triage Protocol</u>: This protocol for acute stroke patients was approved by the Emergency Medical Care Committee (EMCC). An implementation system is being developed. The symptom onset time frame for an "acute" stroke was changed from two to three hours based on suggestions from the Stroke Task Force. Acute stroke with symptom onset should be logged in the Quality Assurance Network within three hours.

IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Linda Rosenberg, R.N.)

No report.

V. ROC (Resuscitation Outcomes Consortium) Update (Dan Davis, M.D.)

ROC is currently at the point of discussing renewal. This decision will also be heavily influenced by the FDA (Food and Drug Administration) and the Data Safety Monitoring Board. ROC has a meeting this week regarding the issue of whether or not San Diego ROC will be renewed. ROC San Diego is into three and-one-half years of a five year grant.

Enrollment has been slow in the Hypertonic Saline Study. The study is dependent on the paramedics and MICN's identifying cases. Dr. Davis contacts the trauma team directly in each hospital where a patient has been enrolled in the study.

In regard to the Epistry Study, there has been difficulty but the County staff has been very helpful. The QCS data base is not set up in such a way that the data fields can be easily queried. The ROC staff find they are falling behind when having to read the narratives to capture the data.

VI. <u>AEROMEDICAL TRANSPORT USE IN THE SAN DIEGO TRAUMA SYSTEM</u> (Alan Smith, Ph.D., County EMS)

The following are some highlighted comments from this presentation by Dr. Smith.

- Is an invaluable trauma resource saving much time in long transports.
- Carries with it a risk of crashing and is expensive, however, statistics show a person was more likely to be involved/die in an ambulance crash than an air transport.
- The average time from when a first agency is notified to when the aeromedical agency is notified is twenty minutes.
- Safety track record is outstanding.
- An aeromedical event is a high profile event drawing much attention.
- It is not always faster from when 9-1-1 is called to when the patient arrives at the hospital.
- Mercy Air has locations in Carlsbad and El Cajon.
- A map showing catchment areas was shown.
- 24% percent of the population lives within 10 minutes of a trauma center and 93% of the population within 30 minutes.
- From the period from July, 2004 through June, 2005, there were 9,721 total trauma patients. Of those, 781 were aeromedical transports from the field and 14 were interfacility air.
- The majority of the aeromedical patients come from the San Diego North Coastal area near where Highways 5 and 78 come together.
- The further you are away from San Diego, the higher the percentage of patients transported by air.
- Scripps La Jolla receives 20% of their patients by air.
- Palomar and Sharp Memorial receive 9% each and Children's 11%.
- In terms of transporting from the scene of the most severely injured patients, 12% of patients transported by air had an ISS (Injury Severity Score) in the highest category with the highest number between 25 and 75. Only 7% of ground transports were this severe.
- Children were the most mild cases transported in which 58% of them didn't meet major trauma criteria but did meet trauma triage criteria and aeromedical trauma triage criteria.

VII. <u>HEALTH ADVISORY COMMITTEE ON THREATS</u> (HACOT) (Linda Rosenberg, R.N.)

No report.

VIII. SAN DIEGO HEALTHCARE DISASTER COUNCIL

(Linda Rosenberg, R.N.)

The State-wide drill is scheduled for Thursday, October 25, 2007, so final preparations are being made for that.

All grant applications and materials have been turned in for HRSA Year Five. (HRSA's new name is Healthcare Preparedness Program (HPP).

Last month Mark Kramer, M.D., Sharp Memorial, expressed an interest in being the BSPC representative to the Cardiology Advisory Committee. (Dr. Kramer not in attendance this date.)

Dr. Dunford stated that he is currently the State Chair for STEMI issues and asked for any feedback from attendees that he can share with the State.

X. <u>SET NEXT MEETING/ADJOURNMENT</u>

The next meeting was scheduled for Tuesday, November 20, 2007, 11:00 a.m. at Sharp Spectrum Auditorium 8695 Spectrum Center Court, Kearny Mesa, San Diego.

The meeting adjourned at 12:10 p.m.

Respectfully submitted,



JEAN M. SHEPARD DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES

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WILMA J. WOOTEN, M.D., M.P.H. PUBLIC HEALTH OFFICER

Base Station Physicians' Committee Judd Glasser, M.D., Chairperson c/o Emergency Medical Services 6255 Mission Gorge Road San Diego, CA 92120

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BASE STATION PHYSICIANS' COMMITTEE MEETING

Minutes

Tuesday, November 20, 2007

Members Present

Davis, M.D., Dan – UCSD/Mercy Air Dunford, M.D., Jim – City of San Diego Glasser, M.D., Judd – Tri-City

Grad, M.D., Michele – Palomar/Pomerado

Harley, M.D., Jim - Children's

Kramer, M.D., Mark – Sharp Memorial Linnik, M.D., Bill – Sharp Grossmont

MacPherson, Gary – Co. Paramedic Agencies' Comm.

Miranda, Aaron – S.D. Co. Paramedics' Association

Reilly, M.D., Ian – Scripps La Jolla

Rosenberg, R.N., Linda - Sharp Memorial

Stonecipher, R.N., Joanne – Southwestern College

Zahller, M.D., Steve - Scripps Mercy

County Staff Present

Haynes, M.D., Bruce Pate, R.N., Rebecca Royer, R.N., Diane Stepanski, Barbara

Recorder

Rupp, Merle

Guests Present

Allington, R.N., Linda – Carlsbad Fire Anderson, R.N., Marilyn – Vista Fire Bourdon, R.N., Darlene – Scripps Mercy Broyles, R.N., Linda – RCCP/AMR Danishwar, Jamila – UCSD Dotson, R.N., Melody – UCSD Foehr, Rick – EMSTA, Inc. Graydon, R.N., Cheryl – Palomar

Henry, Chad - American Medical Response

How, Chorng-Kwang – UCSD

Howard, R.N., LuAnn – Scripps La Jolla Kelly, R.N., Donna – UCSD ROC

Madati, P. Jamil – Children's

Majerczak, R.N., Karen – Tri-City

Meadows-Pitt, R.N., Mary – Sharp Grossmont Moor, Brandon – S.D. Medical Services Enterprise Ochs, R.N., Ginger – San Diego Fire Rescue

Quinn, R.N., Michele - Children's

Sallee, M.D., Don – Naval Medical Center San Diego

Scott, Chris – North County Fire

Seabloom, R.N., Lynne – Oceanside Fire

Steen, R.N., Pam - Mercy Air

Van Drunen, Tara – Naval Medical Center San Diego

Vivieros, R.N., Dinarte – Children's Workman, Debi – Palomar College

I. INTRODUCTIONS/ANNOUNCEMENTS

Judd Glasser, M.D., Chair, brought the meeting to order at 11:00 a.m. Attendees introduced themselves.

II. APPROVAL OF MINUTES

MOTION made by Michele Grad, M.D., Seconded by Mark Kramer, M.D., to approve the Minutes of October 16, 2007 as submitted. MOTION carried.

11-20-07, Page 1 of 4

III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)

<u>Change in Legal Hold of Patients in Hospitals</u>: A representative from County Behavioral Health recently spoke at EMOC (Emergency Medical Oversight Committee) regarding a change that will take effect January 1, 2008 which will increase the use of an eight-hour hold to twenty-four hours in any LPS (Lantermann-Petris-Short) hospital. Staff must utilize a 5150 Code or medical hold and the County is also changing the 5150 process. Dr. Haynes will send out more information as it is discussed further at EMOC.

Dr. Haynes will send out a written report for BSPC at a later date.

IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Linda Rosenberg, R.N.)

The BHNC's should have some audit reports to present at the January 15, 2008 meeting.

V. ROC (Resuscitation Outcomes Consortium) Update (Dan Davis, M.D.)

ROC San Diego is facing a renewal process as a group and because it has taken so much time to go through all the regulatory hurdles, the National Institute of Health (NIH) has informed San Diego ROC, until enough patients are enrolled in each of the on-going trials, renewal won't be considered. This would constitute a gap between ROC I and II. Currently each site is reviewing their financial status to determine whether or not they can continue to operate between the gap.

ROC San Diego is working with UCSD to ascertain what they are willing to do and also re-addressing the issue with the City of San Diego to determine if they would consider joining the program. One year and-one-half remains in the first year of ROC San Diego.

ROC has clearly had an impact on the American Health Association (AHA) meetings. Dr. Davis still needs to be called when a patient is being enrolled in ROC. Approximately 100 patients are currently enrolled in the Hypertonic Saline Study portion of ROC.

VI. CPAP/BIPAP DEVICES (Jim Dunford, M.D.)

The following are some highlighted comments from this presentation by Dr. Dunford:

- Dr. Dunford is giving eleven lectures to the 450 San Diego City paramedics regarding the rationale and use of non-invasive positive airway ventilation (NPPV).
- The purpose of NPPV (including CPAP and BiPAP) in patients with severe respiratory distress is to decrease the work of breathing and recruit alveoli.
- BiPAP is not commercially available today in the prehospital setting.
- CPAP and BiPAP have been used for a long time in San Diego County hospitals.
- NPPV has been demonstrated in numerous in-hospital trials to reduce the work of breathing, lower the intubation rate and reduce mortality.
- CPAP is now being implemented in many EMS communities.
- The three manufacturers of prehospital CPAP are Respironics, Boussignac and Emergent. Each device has advantages and disadvantages.
- The Respironics unit is very portable, has an excellent mask that is compatible with

- hospital BiPAP devices, employs inexpensive valves to set airway pressure and can be equipped with an N95 filter. Switching valves (5cm, 7.5, 10cm) could be difficult in an acute patient so selecting one fixed pressure (ex. 10cm H20) might be best.
- The Boussignac mask device creates CPAP proportional to flow from 10/25L minute. The device allows sunctioning but there is no N95 exhalation capability and we found it hard to consistently create 10cm H20 pressure in the UCSD Respiratory Therapy lab; emergency department turnover is easy with the device as it can be plugged into any wall O2 outlet.
- The Emergent Portovent device was purchased for the Houston Fire Dept. by Methodist Hospital to reduce the number of intubated patients in the community. They like it. The device allows the user to easily dial in a pressure, has a nice mask and accommodates an N95 filter. Each hospital emergency department would need to have this device to make turnover easy.
- CPAP is considered to be at the Basic Life Support (BLS) level.
- Each device allows a nebulizer to deliver Albuterol/Atrovent treatments.
- According to a JEMS survey, 43% of the 250 largest U.S. cities are now using CPAP.
- San Diego Medical Services Enterprise paramedic Brandon Moor stated that he used a Respironics CPAP device for two years in the Hemet, California area. There were numerous COPD (Chronic Obstructive Pulmonary Disorder) and pulmonary edema patients that benefited dramatically, some with almost complete turnaround prior to arrival.
- The hardest aspect of CPAP for patients is overcoming a claustrophobic sensation when the mask is strapped to the face to achieve the necessary tight seal.

VII. <u>HEALTH ADVISORY COMMITTEE ON THREATS</u> (HACOT) (Linda Rosenberg, R.N.)

HACOT will meet again in December, 2007.

VIII. SAN DIEGO HEALTHCARE DISASTER COUNCIL

(Linda Rosenberg, R.N.)

(Dr. Haynes):

- A meeting was held with various hospitals, clinics, skilled nursing facilities and others on Friday, November 16, 2007 to discuss the various firestorm experiences from the October, 2007 wild fires in San Diego County.
- The San Diego Healthcare Disaster Council will also meet on December 12, 2007 which will give more hospitals and clinics a further opportunity to share their individual experiences.
- There were nine separate fires burning simultaneously in San Diego County at one time during the October fires and approximately 355,000 acres were burned.
- There were ten deaths directly related to fire.
- Nineteen patients were admitted to UCSD Burn Center, two of those died. There were a record number of respiratory distress calls in the days following all the smoke.
- It was the largest non-hurricane evacuation in U.S. history with approximately a half-million people evacuating. The 9-1-1 reverse system did work very well.
- The Medical Operations Center (MOC), developed after the 2003 wildfires, worked very well and was the major point of contact for the medical system.
- Pomerado Hospital was evacuated in less than two hours.
- The new Web EOC system worked very well.

- There are close to 800 Medical Reserve Corps volunteers now and many assisted in the firestorms.
- The San Diego County Medical Society provided a number of volunteers and the Pharmacy group did a great job evaluating patients as well.
- There were a number of ambulance strike teams and they were used to re-populate hospitals. At one time, there were approximately 10,000 people staying at Qualcomm Stadium.

IX. <u>ITEMS FOR FUTURE DISCUSSION</u>

None noted.

X. <u>ELECTION FOR CHAIR FOR 2008</u>

Judd Glasser, M.D., Tri-City, volunteered to remain as Chair of BSPC for 2008.

XI. <u>SET NEXT MEETING/ADJOURNMENT</u>

The next meeting was scheduled for Tuesday, January 15, 2008, 11:00 a.m. at Sharp Spectrum Auditorium 8695 Spectrum Center Court, Kearny Mesa, San Diego.

The meeting adjourned at 12:10 p.m.

Respectfully submitted,